U.S-Cepartment of Labor Office of Labor-Management Standards Washington DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved Office of Management and Budget No 1215-0188 Expires 11 30 2006

This report is mandatory under P L 86-257 as amended Faiture to compty may result in criminal prosecution, fines, or civil penalties as provided by 29 U S C 439 or 440



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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

	2 Fiscal Year Covered From
	1 / 1 / 2004 Through 12 / 31 / 2004
3 Name and address of person filing.	4 Name file number and address of labor organization.
Name Alan J Ehl ,	Name Empire State Carpenters
~ ~	Labor Organization File Number 038-352
PO Box Bldg Room No If any	PO Box Building and Room Number If any
Street 19 Evergreen Avenue	Street 270 Motor Parkway
City Middle Island	Chy Hauppauge
State New York ZiP Code + 4 11953	State New York ZIP Code + 4 11788
5 Position in labor organization ";	
A Held an interest in engaged in transactions (including loans) with monetary value from an employer whose employees your organic	
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest, Transaction or Income
Name	and the second control of the second control
Trade Name If any	
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Trade Name If any	7 b Amount
Trade Name if any PO Box Bidg Room No if any	7 b Amount
Trade Name If any P O Box Bldg Room No If any Street City	7 b Amount
Trade Name If any PO Box Bidg Room No if any Street City State ZIP Code + 4	7 b Amount
Trade Name If any PO Box Bidg Room No if any Street City State ZIP Code + 4 15 Signature and verification The undersigned declares under penalty	7 b Amount Signature y of Perjury and other applicable penalties of the law that all of the information sanying documents) has been examined by the signatory and is to the best of the
Trade Name If any PO Box Bidg Room No if any Street City State ZIP Code + 4 15 Signature and verification The undersigned declares under penalt submitted in this report (including the information contained in any accomp	7 b Amount Signature y of Perjury and other applicable penalties of the law that all of the information sanying documents) has been examined by the signatory and is to the best of the

Name of Person Filing Alan Ehl	File Number U	
B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested		
8 Name and address of Business (including trade name if any) Name Empire State Fringe Benefit Fund Trade Name if any Carpenter PO Box Bidg Room No if any Street 270 Motor Parkway City Haupppauge State New York ZIP Code + 4 11788	9 Business deals with X a Labor Organization b Trust c Employer	
10 If 9 b or 9 c is checked give trust or employer's name Name Trade Name if any PO Box Bidg Room No if any Street City State ZIP Code + 4	11 a Nature of such dealing 11 b Approximate dollar value of such dealing 12 a Nature of Interest held or income received Education Conference Fee	
	12 b Amount \$1 025	
C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value		
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any) Name Trade Name if any P O Box Bldg Room No if any Street	14 a Nature of payment	
State }	14 b Amount of payment.	
13 b is the Business an Employer or Consultant ?	` *	

Name of	i Person Filino	nela I	₽h1

File Number U

Part B Continuation Page

			
8 Name and address of Business (including trade name if any)	9 Business deals with	
Name Empire Fringe Bene	fit Fund	★ a Labor Organization	
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PO Box Bldg Room No If any		b Trust	
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Name of Person Filing Alan Ehl	File Number U
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Part B Continuation Page

8 Name and address of Business (including trade name if any)	9 Business deals with
Name Empire State Fringe Benefit Funds	a Labor Organization
Trade Name if any Carpenter	b Trust
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Street 270 Motor Parkway	c Employer
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10 If 9 b or 9 c is checked give trust or employers name	11 a Nature of such dealing
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	Educational Conference Travel
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Name	of	Person	Filina	∆1an	Eh l

File Number U

Part B Continuation Page

8 Name and address of Business (including trade name if any)	9 Business deals with
Name Empire State Fringe Benefit Funds	★ a Labor Organization
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Street 270 Motor Parkway	
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Trade Name of any	
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	12 a Nature of interest held or income received
	Educational Conference Lodging
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	and the second to the second t
	12 b Amount \$1 029

Name of Person Filing Alan Eh	ne of Person Filmo	Alan	Eh1
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File Number U

Part B Continuation Page

8 Name and address of Business (including trade name if any)	9 Business deals with
Name Empire State Fringe Benefit Funds	No Labor Organization
Trade Name of any Carpenter	X a Labor Organization
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PO Box Bidg Room No If any	c Employer
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-	A - 4
	12 b Amount \$544
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Name of Person Filing Alan Ehl	File Number U

Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)	9 Business deals with
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	12 a Nature of interest held or income received
	Trustee Meeting Lodging
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	12 b Amount \$339

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Name of Person Filing Alan Ehl	File Number U

Part B Continuation Page

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	12 a Nature of interest held or income received
	Membership Dues
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	12 b Amount \$30°
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